

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>Qef</i>	<i>2 1020</i>	<i>4/27/01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	8/18/00
2	8/18/00
3	8/18/00
4	8/18/00
5	8/18/00
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49	8/18/00
50	8/18/00

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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